

APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Date:: 02/21/02
Application Type:: REGULAR
Subject Matter:: UTILITY
CD-ROM or CD-R?: NONE
Title:: STREPTOCOCCUS PYOGENES
POLYPEPTIDES AND
CORRESPONDING DNA FRAGMENTS
Attorney Docket Number:: PHARMA-18

INVENTOR INFORMATION

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Canada
Status:: FULL CAPACITY
Given Name:: Denis
Family Name:: MARTIN
City of Residence:: St-Augustin-de-Desmaures
State or Province of Residence:: Quebec
Country of Residence:: Canada
Street of Mailing Address:: 4728-G rue Gaboury
City of Mailing Address:: St-Augustin-de-Desmaures
State or Province of Mailing Address:: Quebec
Country of Mailing Address:: Canada
Postal or Zip Code of Mailing Address:: G3A 1E9

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Canada
Status:: FULL CAPACITY
Given Name:: Stephane
Family Name:: RIOUX
City of Residence:: Beauport
State or Province of Residence:: Quebec
Country of Residence:: Canada
Street of Mailing Address:: 869 avenue des Pinsons
City of Mailing Address:: Beauport
State or Province of Mailing Address:: Quebec
Country of Mailing Address:: Canada

Postal or Zip Code of Mailing Address:: G1E 1J3
Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Canada
Status:: FULL CAPACITY
Given Name:: Bernard
Middle Name:: R.
Family Name:: BRODEUR
City of Residence:: Silery
State or Province of Residence:: Quebec
Country of Residence:: Canada
Street of Mailing Address:: 2401 Maritain
City of Mailing Address:: Silery
State or Province of Mailing Address:: Quebec
Country of Mailing Address:: Canada
Postal or Zip Code of Mailing Address:: G1T 1N6

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Canada
Status:: FULL CAPACITY
Given Name:: Josee
Family Name:: HAMEL
City of Residence:: Silery
State or Province of Residence:: Quebec
Country of Residence:: Canada
Street of Mailing Address:: 2401 Maritain
City of Mailing Address:: Silery
State or Province of Mailing Address:: Quebec
Country of Mailing Address:: Canada
Postal or Zip Code of Mailing Address:: G1T 1N6

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Canada
Status:: FULL CAPACITY
Given Name:: Patrick
Family Name:: RHEAULT
City of Residence:: St-Etienne-de-Lauzon
State or Province of Residence:: Quebec
Country of Residence:: Canada
Street of Mailing Address:: 44 rue Belair

City of Mailing Address:: St-Etienne-de-Lauzon
State or Province of Mailing Address:: Quebec
Postal or Zip Code of Mailing Address:: G6J 1P9

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 23599

REPRESENTATIVE INFORMATION

Representative Customer Number:: 23599

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/269,840	02/21/01

ASSIGNMENT INFORMATION

Assignee Name:: Shire BioChem Inc.
Street of Mailing Address:: 275 Armand Frappier Boulevard
City of Mailing Address:: Laval
State or Province of Mailing Address:: Quebec
Country of Mailing Address:: Canada
Postal or Zip Code of Mailing Address:: H7V 4A7